



*“Partnering with families and the community to provide a ‘Circle of Care’
to help older adults live with purpose and dignity since 1976”*

VOLUNTEER TRAINING MANUAL

*Welcome to Circle Center Adult Day Services.
We thank you for choosing Circle Center for your volunteer time.*

As a premier licensed, non-profit adult daycare center in Virginia, Circle Center Adult Day Services provides high quality, cost-effective daycare for frail or functionally impaired adults and respite, education and support for their family caregivers.

We passionately believe that engagement, activity, care and conversation are essential ingredients for cognitive and emotional health. A clean, pleasant, sensory-satisfying environment contributes to the well-being of our adults and *volunteers play a vital role* at Circle Center Adult Day Services to assist us with this *Circle of Care*.

The training you receive at Circle Center Adult Day Services will prepare you to work with older adults at Circle Center as a volunteer. You may, at the recommendation of the Program Director, be eligible to attend other trainings to enhance your volunteer education and service delivery here at Circle Center Adult Day Services.

We hope you enjoy your training and volunteer time at Circle Center Adult Day Services. Please let us know anyway we can make your experiences more rewarding. Thank you for helping older adults live with dignity and purpose!

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GENERAL INFORMATION

CIRCLE CENTER'S VISION

We envision a future where older adults and their families have the freedom to live together with purpose and dignity in a supportive community.

PROGRAM GOALS

- To prevent or delay residential placement by providing supports for continued community living.
- To maintain and improve functional abilities and coping skills.
- To improve the quality of individual and family life.
- To advance the development of community-based care for older adults who are frail or impaired.

SAFETY

Physical Assistance

DO NOT provide physical assistance to any participants. If a participant asks for assistance, tell them that you are getting help and inform a staff person that a participant needs physical assistance. You may escort a participant to an activity if you have been trained to do so and if the Program Supervisor has approved the participant to be escorted to the activity. Circle Center staff provides bathroom support for the participants. Volunteers are not permitted to assist participants with their bathroom needs.

Maintaining Safety In All Parts Of The Building

We all must do our part to maintain a safe and secure building for participants and each other.

- A staff member is in each general area where participants are gathered. If you have been asked to be in a particular room, please do not leave participants unattended. This is especially important at lunch time and snack time because of the danger of people choking. If you must leave the room, alert another staff member, preferably the program supervisor.
- Please pick up after yourself. Make sure all trash is placed in the garbage containers and immediately wipe spills. Always keep chairs out of walkways and pushed under the table when not in use. We must be cognizant of the fact that many of our participants use mobility devices and/or may have visual problems and any spill or obstacle could become a safety hazard.
- Make sure your personal belongings are not kept in program areas/activity rooms.

- We have four ways of managing confused participants who might leave the building and become lost or physically vulnerable.
 1. We attach membership badges. Note: For some people, the badges must be attached so they won't be removed. Adults who have the potential to wander wear a Circle Center Adult Day Services address label on the upper back of their shirt. The program supervisor will let you know who has the wandering will.
 2. We engage participants through activity and/or conversation to help maintain focus and prevent them from wandering.
 3. We avoid over-stimulation. Loud music and noises, too much physical activity and too many activities going on simultaneously can trigger confusion, anxiety and the need to roam.
 4. We have an alarm system on all of our outside doors. When the system is "on" and a door is opened, a buzzer rings thus alerting staff of a potential problem.
- Confused participants may accidentally eat or drink inedible objects, fall or misplace or hide objects; we encourage all staff and volunteers to be aware of those participants and observe their behavior while in their presence and intervene if necessary. Always inform a supervisor of a mishap or potential accident that you diverted.

ABSENCES OR TARDINESS

- If you must be absent from your regular time, let the volunteer manager know as soon as possible. If you cannot contact the volunteer manager directly, please call 355-5717 and let your staff contact know that you will be absent.
- If you are unavoidably late, let the volunteer manager know as soon as possible. If you cannot contact the volunteer manager directly, please call 355-5717 and let your staff contact know that your estimated arrival time.

PERSONAL PROPERTY

The Center does not assume responsibility for personal property of any employee and volunteer that is lost, damaged or stolen on or about the premises. The staff break room has lockers where you can place your purse, etc. You must provide your own lock and remove it when you leave Circle Center after your volunteer shift. Center property shall not be removed from the premises without prior approval of the Executive Director.

Personal property found on the premises should be delivered personally to your supervisor who will provide safekeeping and who will notify the Executive Director. Incidents involving lost property, suspected theft and other occurrences should be reported on the day it occurs or is discovered on the "Incident Report" form available from the Executive Director.



DRESS RECOMMENDATIONS

- Presenting a neat and professional appearance inspires confidence in those who depend on us.
- As in other life situations, appearance needs to be consistent with roles and responsibilities; dress that is appropriate on campus or at a social event may be too informal here, and church clothes are likely too formal for work use.
- Appropriate dress also includes the concept of modesty. Clothing that is too short, snug, low cut in front or back can be offensive to others and may alter how participants relate to you. Older adults may have different definitions of what is appropriate and our participants must be comfortable with the surroundings at all times.
- Adornment other than dress also needs to be considered. Excessive jewelry, makeup, and/or fingernails can compromise movement in activities and pose safety risks. Footwear and jewelry should suggest your readiness to react in emergency situations as needed.

Shoes

- Volunteers working directly with participants should avoid wearing heels and open-toe shoes.
- Non-slip soles are necessary for your own traction and the stability of those you assist.
- Need to be laced, buckled, or snug enough that you can run in them in an emergency.
- Strapless sandals, clogs, rubber "flip flops" are probably not safe to wear here.

Pants

- Jeans are allowed; keep in mind the type of image you want to convey.
- Shorts are permitted if they are knee length, loose fitting, and do not hang below the hip. Exercise shorts are not allowed.
- Jeans and pants with holes, patches, and/or ragged hems are not allowed. Pants are not to hang below the hip.
- Underwear is not to be seen.

Skirts/Dresses/Blouses

- Staff and volunteers frequently bend, lift and stoop and it is advisable to wear skirts and dresses at an appropriate length to allow for movement with modesty.
- Sleeveless tops are allowed if they are not too low cut at the front, back or armhole. A low cut item with tank top underneath is acceptable.
- Items that are, or look like, underwear are not appropriate (e.g., strap-style T-shirts, camisoles).
- Tops must be waist length or longer unless worn over a longer item; bare midriffs are not appropriate and not allowed.

- Holes or large cut out/bare decorative areas are not appropriate.

Jewelry

- More than two earrings per ear may convey a social not professional image.
- Long loop earrings could pose a safety risk if pulled or caught when assisting someone.
- Facial rings or studs are not permitted. You may however use flesh color plugs in piercings during volunteer time at Circle Center.

Nails

- Long nails can seriously scratch others when providing physical assistance; frequent and thorough hand-washing for infection control may be more difficult and less effective with very long nails.

Hats

- Hats should not be worn inside unless they have religious significance for the wearer.

Cologne/Perfume

- Please be mindful that strong scents may be irritating or trigger allergic reactions in others and it is therefore not recommended that perfumes and/or colognes be worn while at Circle Center.



PROCEDURE FOR IMMINENT SEVERE WEATHER

SEVERE WEATHER

Volunteers: If severe weather is approaching and you are volunteering you are advised to follow the directions of the senior staff member and Circle Center Adult Day Services Severe Weather protocol.

During questionable weather conditions, call Circle Center Adult Day Services to get direction on Circle Center's weather closing decision. If at anytime you feel uncomfortable or unsure about coming in to volunteer because of the weather, please call to let us know your status.

In the case of imminent severe weather (tornado, high winds, electrical storm, hail) first priority will be given to safeguarding participants.

The senior staff member on duty will be in charge.

A staff member will be designated to monitor radio and/or TV reports and relay information to the staff member in charge.

All participants must be kept inside unless authorities give other instructions. Any participants who are outside must come in at the first sign (thunder, etc.) of impending severe weather.

All participants and staff must stay away from windows during high winds, hail.

All Venetian blinds should be lowered down to the sill and tilted downward to prevent flying glass. Any windows blinds should be covered with a thick blanket or other screen if participants are in the area.

In power failure, emergency battery lights in the hall will come on and the telephone in director's office will go to battery back-up. Candles may not be used.

In case of approaching tornado, all participants and staff should move to the short wing of the central hallway, away from exits. Doors to offices and other rooms should be closed.

All first aid kits, a closed container of water and all blankets and bedspreads shall be moved to the area where participants and staff are congregated.

- A.** In the case of a forecast of hurricane, snowstorm, flood or other weather emergency where advance notice is given, the Executive Director may decide to close the center.
- B.** Family members will be called at home or work and informed that the center will be closing at a designated time (preferably not less than one hour from the time called). If the family member indicated they cannot come, the staff member will inform them they must make other transportation arrangements (neighbor, taxi, etc.) because the center must close.
- C.** In the unlikely event that van riders are still at the center when a decision is made to close, the van offices will be called and arrangements made for pickup.
 - 1.** In the event that one or more participants are not picked up before closing, staff will use their best judgments in implementing one of the following options:
 - 2.** 2 staff wait with participant(s) until family arrives (if weather allows and it is assured that family is coming)
 - 3.** Drive participant home (if it is known that someone is at home to receive the participant and weather allows).
 - 4.** Take the participant home to the staff member's house (if weather is critical and family cannot be located); in that case the staff member should take participant's chart with current meds and phone numbers and any medications at the center. Continuous attempts should be made to reach the family.

THE DO'S AND DON'TS ABOUT CIVIC ENGAGEMENT AT CIRCLE CENTER ADULT DAY SERVICES

- We are a smoke free environment.
- Cell phones must be off while at CCADS. Please go outside, or in the staff break room. If you need to make or receive a call. Let the supervisor know where you are.
- The living room areas by the kitchen are for the participants to relax and participate in social activities. Please do not use the recliners. If you find yourself with nothing to do, seek out the supervisor and ask what they need help with. Seek out the volunteer manager for additional activities.
- There must be one staff member in each area at all times.
- Everyone (staff and participants) goes by first names. We feel this is warmer than “Mr.,” “Mrs.” or “Miss”.
- Please ask supervisors if there is someone/something you don’t understand.
- Push chairs under tables, pick items/clutter off floor and be sure to wipe spills. (these are potential hazards)
- It is the process, not the product. It doesn’t matter if the painted tree is purple or no one wins the game of UNO. Our goal is for participants to enjoy the activities.
- Always check with the program supervisor or activities director if you are not involved with a participant or an activity. There is a lot to be done!
- Only assist participants with their coats if they are confused or need help physically. Allow family caregivers and independent participants to hang up or retrieve their own coats.
- Be aware of others in the room when you are engaged with individual or group, i.e. frail individuals who get *up and walk or might sit when chairs are not there*.
- Do not carry drinks (i.e. cups of coffee, soda) around with you when working. Please do not eat or chew gum in the program areas. The staff break room on the west side is open for volunteers.
- Be sure not to buy any items (food or otherwise) for any participant, even if they ask. Please report this request in private to the supervisor.
- Please do not give the participants any food or beverage unless it has been approved by the supervisor.
- Use your volunteer time wisely. Do not read the paper, do homework, or study when working. Tell the volunteer manager if you feel like you have too much idle time.
- Try to include participants in your conversations.
- Please, do not talk about participants in front of them!
- If you have been asked to do a volunteer activity that you are not comfortable with, please let the activities director know. She will alter your assignment to something that is more enjoyable for you.



PARTICIPANTS' RIGHTS

Statement of Rights of Circle Center Adult Day Services Participants

- *The right to be treated as an adult, with respect and dignity.*
- *The right to participate in a program of services and activities that promote positive attitudes about one's usefulness and capabilities.*
- *The right to participate in a program of services designed to encourage learning, growth, awareness of constructive ways to develop one's interests and talents.*
- *The right to be encouraged and supported in maintaining one's independences to the extent that conditions and circumstances permit, and to be involved in a program of services designed to promote personal independence.*
- *The right to self-determination within the day care setting, including the opportunity to:*
 - *participate in developing one's plans for services*
 - *decide whether or not to participate in any given activity*
 - *be involved to the extent possible in program planning and operation.*
- *The right to be cared for in an atmosphere of sincere interest and concern in which needed support and services are provided.*
- *The right to privacy and confidentiality.*



VOLUNTEER CONFIDENTIALITY POLICY PROCEDURE

Confidentiality is essential to providing professional care. All volunteers are expected to insure that confidentiality is maintained in all aspects of participant care, interaction with caregivers, relationships with other agencies and providers, and contacts with the general public, including the media.

Specifically, all categories of volunteers and volunteer staff must avoid:

- 1) Discussing one participant with another or in front of a group of participants.
- 2) Revealing any information about a participant to another participant's caregiver or discussing one caregiver with another.
- 3) Discussing participants with anyone outside the center environment except with center staff.
- 4) Sharing information about a named participant with other agencies or providers, except when authorized to do so by the participant or caregiver.
- 5) Discussing other staff with participants or caregivers, other agencies and providers or the general public.
- 6) Discussing any aspects of the center's operation, participants or caregivers with the general public, including the media, without prior authorization from the executive director or designee.
- 7) Disseminating written information about a participant unless there is written authorization from the participant or caregiver. For teaching purposes, descriptive information may be used if all identifying information is eliminated.
- 8) photographing or video taping participants and/or center activities without the approval of designated center staff.

Violation of Confidentiality Policy can cause release from volunteer services.



VOLUNTEER RIGHTS STATEMENT

As a Circle Center Adult Day Services Volunteer you are entitled to:

- A rewarding volunteer experience
- Information about the Center and services provided through volunteer orientations and trainings
- Respect from staff, participants and families. You will be treated as a co-worker, not just "free help" or a prima donna. Circle Center Adult Day Services welcomes and is grateful for your volunteer time and commitment
- A suitable assignment, with consideration for personal preference, allotted time, temperament, life experience, education and employment background
- Training for the job, thoughtfully planned and effectively presented
- Sound guidance and direction, by someone who is experienced, well-informed, patient and thoughtful
- Opportunities to enhance your skills and knowledge, through advancement to assignments of more responsibility
- Recognition and respect for your ideas, comments and suggestions We welcome your unique participation with our participants and will thoughtfully consider your ideas and feedback.
- Answers to your questions and feedback on your performance
- Accurate time records
- Reports as requested for any specific requirements you have - signed volunteer time reports, activities reports, evaluation for class or community service project - in a timely manner
- Updates from Volunteer Manager, Program Directors and Activity Coordinators on participants as related to your time with them and any changes in activity schedules



VOLUNTEER RESPONSIBILITY STATEMENT

As a Circle Center Adult Day Services Volunteer you are responsible for:

- Commitment to your scheduled time. Consistency is important to maintain the expected flow of the day and to help form relationships with both participants and staff.
- Punctuality. Activities are scheduled and participants come to know when you are expected and look forward to your arrival.
- Dressing appropriately -business comfortable casual. Most of the time you will be working directly with the participants or the staff and will need to wear clothing and shoes that are comfortable to participate and facilitate activities. Flip-flops or similar shoes could pose a safety issue and are not recommended.
- Logging in your volunteer time daily. The volunteer log is located at the front desk.
- Attending volunteer orientation, volunteer trainings and completing all necessary paperwork before commencement of volunteer time.
- Informing the volunteer manager of any specific requirements you need - signed volunteer time reports, activities reports, evaluation for class or community service project - in a timely manner.
- Keeping current with the schedule of events by reading the monthly activities calendar prior to the start of your volunteer time.
- Upholding the Participants' Rights Statement and Confidentiality Agreement.
- Sharing your magnificent community-service oriented spirit with staff and participants.



Purpose of Activities for Participants:

- Social interaction with staff, volunteers and other participants
- Stimulates cognitive abilities
- Stimulates large and small motor skills
- Experience sense of well-being, satisfaction and pride for themselves
- Acquire new skills
- Learn ways to use leisure time

General Guidelines:

- Be aware of scheduled activities. The calendar is posted in several places including the staff room. Request a copy from the volunteer manager. Please do not start an activity with an individual or group if there is a scheduled activity about to begin. Please do not initiate an activity (game, craft, conversation, etc.) with individuals who are not participating in the activity. Check with program supervisor about appropriateness of activity you want to begin.
- If a staff or volunteer is leading a large group activity which requires the attention of the participants, do not do anything – loud talk, piano playing, etc. that might make it difficult for that activity to continue. Outside noise could be a distraction and will not allow for optimal sensory satisfaction for the participants during the activity.
- If a small group is playing a game independently or with staff, check to see if you can start an activity with others who are unoccupied rather than joining the ongoing activity.
- Be alert to possibilities of starting participants in games or puzzles with each other.
- When you approach a participant to involve them in an activity, it is often more effective to give them a choice between two activities. Giving them a choice synchronizes independence and cooperation. It also limits the participants' option to say no to involvement.
- Always ask the Program Supervisor for advice or direction regarding an activity. We welcome your creativity, ideas, talents and skills
- Try to include 3 people in an activity. If someone does not wish to participate, having them watch the activity is good for them socially.



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Adults attending Day Services often have different abilities and attention group activities that involve everyone are not always possible. To be part of a group is a normalizing experience which offers the benefit of being in a social atmosphere as well as the opportunity to participate in a meaningful activity that enhances self esteem. Offering individual activities along with small group activities ensures that all participants' needs are being met.

Sample Activities:

- Wash/fold – Some participants like to do activities that remind them of home. They can wipe placemats, tables, etc. with a damp cloth. Participants can fold napkins, towels, or small laundry items.
- Food Preparation - Always being mindful of safety, some adults may assist with baking, meal preparation and discussion of menus or favorite recipes.
- Cut – If the participant has use of their fine motor skills, they can cut coupons, pictures from magazines, simple shapes and letters etc.
- Paste – If the participant has use of their fine motor skills, they can paste pictures on boxes and paper, make collages, and create a scrap book.
- Sort - like objects or pictures. You can ask the participant to “pick all the red objects” or “find all the animal pictures”.
- Match – Have the participant pick out matches from a group. You can use individual lingo cards and hold up picture for adult to match. Simple playing cards can also be used in a matching game.
- Color - Pictures can be colored using crayons and/or pencils. The craft closet has stenciled pictures, seasonal shapes, large letters, and pencils and crayons. Ask the program supervisor if any coloring is needed for bulletin boards or upcoming special activity.
- String – Craft closet has large beads, string and boards for stitching and stringing activity.
- Puzzles – The activity room has multi- level puzzles. Some participants also like simple crossword puzzles, find the object searches and word searches.
- Cards – Get the adult interested in playing solitaire, a matching game or Go Fish. Ask the adult what card games they know and are interested in playing.



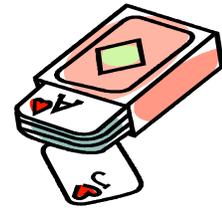
MAKING THE MOST OUT OF EVERYDAY MATERIALS

Index Cards: Category Sort – Draw or cut and paste pictures of items that can be categorized, (i.e. shapes, animals, food,) and use as an individual or small group activity. Lacing Activities – Punch holes in the index cards and reinforce with punch protectors or tape. Using long shoe laces, knot one end and have the participant thread the lace through holes. Cutting Activities – Draw shapes on cards and have the participants cut out the shapes. Lyrics – Write song lyrics on cards to aid the participants while singing. Write a song title on the card, hold it up and have the participant sing the song if possible or recite the lyrics. Write some lyrics to popular songs on one card and the titles on separate cards and play a memory game. Alphabet – Write alphabet letters on cards- duplicates- and play matching game. Write a word on a card to match a picture that has been pasted on another card. Use categories of pictures and words to make the game more interesting. Fill in the Blank - Write one word on each card, or use a picture pasted on the card depicting the word and read a sentence leaving one word out. Let the participant choose the card with the correct word or picture. Charades – Write one action word on each card, or use a picture pasted on the card depicting the word and have participant act out the word. Take turns doing this.

Pasta: Use the variety of pasta shapes available to create some fun, multi-sensory activities. Always remind the participants that the pasta is not cooked and cannot be eaten. Sorting - Place a variety of pasta shapes and/or colors on a table and have the participant sort into categories. Cooking – Many participants still like to cook so if appropriate, have participants measure pasta and staff will cook. This would also be an appropriate time for discussing recipes and family memories. Stringing - Lay out the pasta on the table and have participants create a necklace by stringing the pasta on a thick lace. Pictures – Place pasta, glue and paper on the table and have participant create picture. Use sample pictures or holiday themes. Frames - Use cardboard for frame template and place glue, cardboard and pasta on the table. Let participant paste pasta on the frame. Also you can use paint, markers or crayons to color the pasta.

Deck of Cards: Cards can be used for a variety of activities such as *Sorting* by suit, color, and/or number. *Playing* modified versions of card games. *Building* card houses with the participants. We have some *Pokeno* boards in the activity rooms and you can play with a small group of participants.

Using two decks of cards, *Pick out Matches*, shuffle and lay about twelve out for the participant to play by turning over cards one at a time and trying to remember where to find the match; this is a modified memory game.



Votive Candles: Matching by color, size or scent. Play *Memory Jogger* to reminisce about what events or feelings the colors and scents might trigger. *Stacking*, use as *manipulative*, Play guessing game *What's My Scent and/or Play* candle toss w/ points. *Create* a snow globe using candle shavings as snow and a Ziploc bag for the globe.

Newspapers: We have a many newspapers and magazines that the participants could use for a variety of activities. *Coupon Cutting* – Some participants like to look for coupons and will cut them out. This activity helps with fine motor and cognitive abilities. You could also converse with the participant about the coupons they are clipping – what is the product, do they use the product, who shops for them etc. Please keep in mind that some participants just enjoy the cutting activity and do not actually use the coupons. *Article Sharing* - Cut out favorite articles to share with reading group. *Articles, Pictures and Advertisements* can be used to - cut out pictures for sorts, find words for sorts or other activities, create a collage, make picture frames, reminisce, generate a grocery list, look at the TV section for shows, wrap presents, make, paper jewelry and paper mache, and look at horoscopes, current events, and comics.

This information has been adapted from attendees of the CCADS Montessori-based dementia programming class facilitated by Kelly Lewis, 2008. Please share with us your great ideas for using everyday materials with our Circle Center participants.



HEARING LOSS

Hearing loss is the most common communication disorder in the geriatric population. Communicating with the hard-of-hearing or deaf participant will be more effective if you follow these guidelines:

- Speak at a natural rate, unless you see signs of incomprehension.
- Speak slightly louder than normal. Do not shout.
- Speak with a lower pitch.
- Position yourself within the visual range of the listener - 3-6 feet. It's better to speak face-to-face: face-to-face communication in situations where relatively diffuse lighting is adequate and also lights the speaker's face. This allows the hearing-impaired listener to see the speaker's facial expressions as well as lip movements. Being able to do so helps the hard-of-hearing listener understand what is being said.
- Try to position yourself at the same physical level.
- Reduce background noises when carrying on conversations.
- Use short sentences.
- Sometimes a person who is hard of hearing has a "good" or "better" side -- right or left -- ask them if they do. If they indicate a preference, direct your remarks to the "good" side or face-to-face.
- Avoid abrupt changes of subject or interjecting small talk into your conversation, as your hearing impaired listener will likely use context to a considerable degree in trying to comprehend what you are saying.
- Keep your hands away from your face while talking.
- Do not talk while eating, or laughing.
- If you know (or if it becomes evident) from which side the person hears best, talk to that side.
- Identify the topic of conversation so the listener has some contextual clues.
- Pronounce words clearly. If the hearing impaired listener has difficulty with letters and numbers then say: M as in Mary, T as in top, B as in Boy, and each number separately: "five six" instead of fifty-six; keep in mind that m, n and 2, 3, 56, 66 and b,c,d,e,t and v sound alike.
- Keep a note pad handy and write your words and show them to the hard-of- hearing person if you need to -- just don't walk away leaving the hearing-impaired person puzzling over what you said and thinking you don't care.
- Rephrase misunderstood sentences. Second and third repetitions increase frustration and tension. For example, if the person does not understand when you say I guess we'd better sit down, don't repeat the same sentence. You might say, "Let's take a seat."

Information adapted from Tips on talking to the Hard-of-Hearing by Mike Moldeven on SeniorHealthcare.org and Being a Long-Term Care Nursing Assistant, Fifth Edition, Connie Will-Black, Judith B. Eighmy



TIPS ON TALKING WITH HARD-OF-HEARING ADULTS

TIP

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- Keep your hands away from your face while talking.
- Keep a note pad handy and write your words and show them to the hard-of-hearing person if you need to -- just don't walk away leaving the hearing-impaired person puzzling over what you said and thinking you don't care.
- Talking without food in the mouth.
- Identify the topic of conversation so the listener has some contextual clues.
- Pronounce words clearly. If the hearing impaired listener has difficulty with letters and numbers then say: M as in Mary, T as in top, B as in Boy, and each number separately: "five six" instead of fifty-six; keep in mind that m, n and 2, 3, 56, 66 and b,c,d,e,t and v sound alike.
- Rephrase misunderstood sentences. Second and third repetitions increase frustration and tension. For example, if the person does not understand when you say I guess we'd better sit down, don't repeat the same sentence. You might say "Let's take a seat."



ALZHEIMER'S DISEASE

Alzheimer's disease (AD) is the most common form of dementia, a neurological disease characterized by loss of mental ability severe enough to interfere with normal activities of daily living, lasting at least six months, and not present from birth. AD usually occurs in old age, and is marked by a decline in cognitive functions such as remembering, reasoning, and planning.

A person with AD usually has a gradual decline in mental functions, often beginning with slight memory loss, followed by losses in the ability to maintain employment, to plan and execute familiar tasks, and to reason and exercise judgment. Communication ability, mood, and personality may also be affected.

Between two and four million Americans have AD; that number is expected to grow to as many as 14 million by the middle of the 21st century as the population as a whole ages. While a small number of people in their 40s and 50s develop the disease (called early-onset AD), AD predominantly affects the elderly. AD affects about 3% of all people between ages 65 and 74, about 19% of those between 75 and 84, and about 47% of those over 85. Slightly more women than men are affected with AD, but this may be because women tend to live longer, and so there is a higher proportion of women in the most affected age groups.

** It is difficult to place a patient with Alzheimer's disease in a specific stage. However, symptoms seem to progress in a recognizable pattern and these stages provide a framework for understanding the disease. It is important to remember they are not uniform in every patient and the stages often overlap.*

1st Stage Symptoms may include:

- Recent memory loss begins to affect job performance.
- May not remember recent directions
- Confusion about places—gets lost on the way to work
- Loses spontaneity; initiative
- Mood/personality changes; poor judgment
- Takes longer with routine chores
- Trouble handling money, paying bills

2nd Stage Symptoms may include:

- Increasing memory loss and confusion—shorter attention span.
- Problems recognizing close friends and family
- Repetitive statements/movements
- Restless, especially in late afternoon and at night
- Occasional muscle twitches or jerking; perceptual-motor problems
- Difficulty organizing thoughts, thinking logically
- Problems with reading, writing, and numbers
- May be suspicious, irritable, fidgety, teary, or silly
- Loss of impulse control—sloppy—won't bathe or afraid to bathe—trouble dressing
- Gains and then loses weight
- May see or hear things that are not there
- Needs full time supervision

3rd Stage Symptoms will include:

- Some of the above and the non recognition of family or self in mirror



At a meeting of the Stroke Support Group at Circle Center on May 1, 2000, several participants discussed their frustrations about having had a stroke and how people react to this. They made a list of things they would like others to know about stroke and ways that you can help them. Please consider this list when you are caring for a person who has had a stroke.

HOW YOU CAN HELP ME

- Let me tell you how you can help me best.
- Tell me where we are going before you take me somewhere.
- Treat me as the adult that I am.
- Let me answer questions for myself – don't answer them for me.
- Understand that although I have had a stroke, I can still think for myself.
- Let me do what I am able to for myself. If you do not know what I can do, please ask me.
- Give me time to do what I need to do. I get nervous when I am rushed.
- Be sensitive to my needs and what I am going through.



UNDERSTANDING SENSORY NEEDS IN OLDER ADULTS - VISUAL(SIGHT) & AUDITORY(HEARING)

Adapted from Being a Long-Term Care Nursing Assistant, Fifth Edition, Connie Will-Black, Judith B. Eighmy

Under normal circumstances, human beings receive constant stimulation from the world around them. We see, hear, smell, taste and touch during all of our waking hours. The need for sensory stimulation is as basic as the need for water and food.

Visual Impairment - When a person is visually impaired there are special communication and stimulation tools you can use with an older adult to have a pleasant sensory experience. Visual problems can pose a threat to the safety and independence of older adults and the following approaches will assist you in having a good experience with Circle Center Adult Day Services participants:

- Identify yourself to the participant, "Hi Winnie, I am Marilyn a volunteer here today."
- Describe what you are doing. "I am going to read the newspaper to you today. What news are you interested in?"
- Describe events occurring or the surroundings in a way that creates a word picture.
- Check the Circle Center activity storage areas for books, games, and craft projects with large print. We also have magnifying glasses and sheet magnifiers.
- As with all participants, watch for potential safety hazards.

Hearing Impairment - When a person is hearing impaired there are special communication and stimulation tools you can use with an older adult to have a pleasant sensory experience. Hearing problems can pose a threat to the safety and independence of older adults and the following approaches will assist you in having a good experience with Circle Center Adult Day Services participants:

- Always face the person when speaking (this provides visual clues and increases understanding).
- Do not cover your mouth with your hand.
- Speak slowly and clearly.
- If you are not understood, find new words to say the same thing. Do not repeat the same sentence because this will frustrate the listener.
- Use gestures and body movements to help get your point across.
- Print a word or phrase and show this to the participant to clarify his/her understanding.
- Do not shout. Since the participant hears distorted sounds, making them louder does not make them easier to understand.

Circle Center Adult Day Services Program Supervisors will let the volunteer know which adult might be in need of the above communication tools.



STROKE

There are more than 5 million stroke survivors in the U.S.

Recovery After Stroke: Social Support

Socializing with family and friends is an important part of stroke recovery. But as a stroke survivor, you may have trouble doing the very things that allow you to connect with other people – talking on the phone, understanding what people say, writing letters, taking walks, shopping, getting around or eating out. This can make you feel disconnected and alone at a time when you need more social support than ever before.

Feeling Good About Yourself

Having a stroke is a major setback. With all the changes in your life since the stroke, you may find it hard to feel good about yourself.

But, getting back your self-esteem is important. Self-esteem affects the way you do things for yourself and your willingness to do the things you like. The better you feel about yourself, the more you will do. And the more you do, the better you will feel.

Some tips that may help:

- Make the most of your rehabilitation. Through rehab, you regain independence. And, doing things on your own again will make you want to re-claim your social life.
- Don't be so hard on yourself. Recognize and celebrate any and all progress.
- Work towards a "new normal" instead of trying to do everything you used to do.
- Don't overdo it. Allow time for rest.

Getting the Support You Need

Everyone needs support. And, stroke survivors are no exception. There are many ways to get the support you need.

A support group allows you to interact with other stroke survivors who know what you are going through. People in a support group can:

- Help you find ways to solve problems related to your stroke.
- Share information about products that may help your recovery.
- Encourage you to try new things.
- Listen to your concerns and frustrations.
- Give you a chance to get out of the house.

- Give you a chance to share your story.
- Become your new friends.

Friends and family can also provide support. They can:

- Involve you in their activities.
- Encourage you to join community recreation programs or support groups.
- Arrange for you to attend social gatherings and fun activities.
- List all the phone numbers of the people you care most about, allowing you easy access to them when you need it most.
- Help you buy and write cards or letters to send to people.
- Give you rides to social events.

Some people may not be comfortable with you. They may even avoid spending time with you. Sadly, this is not uncommon. Some tips that may help:

- Try not to take this personally. People are often uncomfortable with things they know little about.
- Take this opportunity to teach others about stroke and how it has affected you.
- Ask for what you need. If you have trouble ordering food in a restaurant, ask your friends and family to help you.

Going Places

So you're in a wheelchair or sporting a cane or walker. So what? Getting out is good for you. It gives you a chance to be with other people. And each time you successfully go places, you build up your confidence to do it again.

- Be sure to plan your outing in advance.
- If you are unable to drive, get a ride with friends and family. Or, call a local bus company to arrange a ride or use public transportation.

What Can Help

- Accept that your body has changed and realize that you can still be active, productive and have a good quality of life.
- Stay involved with the people and activities you enjoy most.
- Look for opportunities to do something worthwhile or fun.
- Volunteer with local events or non-profit organizations.
- Call on the support of people or devices to help you function in your changed body.
- Get information on stroke recovery from National Stroke Association. Visit www.stroke.org or call 1-800-STROKES (1-800-787-6537).
- Check with your local hospital or rehab program, a senior center, or your local stroke association for a list of resources in your area.
- Join a stroke support group. Other survivors will understand your issues, and offer support and ideas for social interactions.
- Speak honestly with your family about your social needs. They'll be glad you did, and, together, you can work out the best solution.

Professionals Who Can Help

- Case manager – helps you facilitate follow-up to hospital care, coordinate care from many different people, and find local resources
- Social worker – helps you make decisions about rehab programs, where you will live, insurance, and support services in the home
- Discharge planner – helps you prepare to live independently in the home

Rehabilitation is a lifetime commitment and an important part of recovering from a stroke. Through rehabilitation, you relearn basic skills such as talking, eating, dressing and walking. Rehabilitation can also improve your strength, flexibility and endurance. The goal is to regain as much independence as possible.

Remember to ask your doctor, “Where am I on my stroke recovery journey?”

Note: This fact sheet is compiled from general, publicly available medical information and should not be considered recommended treatment for any particular individual. Stroke survivors should ask their doctors about any personal medical concerns.



Recovery After Stroke: Thinking and Cognition

Stroke can cause physical problems. It can also affect cognition. Cognition refers to thinking abilities. It's how people use their brains to talk, read, write, learn, understand, reason and remember. Losing skills in this area may affect how you manage everyday tasks, take part in rehabilitation, and live on your own after stroke.

Stroke and Thinking Abilities

Every stroke is unique. The effect the stroke has on your thinking abilities depends on where and how the stroke injured the brain, and your overall health.

Each side of the brain controls different things. So, a stroke on one side of the brain will cause different problems than a stroke on the other side.

Damage to one side of the brain can cause loss of language skills (talking, reading, writing, understanding what people say). It can also cause "verbal memory" loss or the ability to remember things having to do with words. Damage to the other side may cause attention, thinking and behavior problems.

Stroke can also damage the front of the brain. In this case, you are more likely to lose your ability to control and organize thoughts and behavior. This makes it hard to think through the steps to complete a task. Front-brain strokes may not affect your ability to do or remember specific things.

Memory Loss

Memory loss after stroke is common, but not the same for everyone. There are many ways your memory can be affected by stroke.

- Verbal memory – memory of names, stories and information having to do with words.
- Visual memory – memory of faces, shapes, routes and things you see.
- If you have memory damage, you may have trouble learning new information or skills. Or you may be unable to remember and retrieve information.
- Stroke can cause vascular dementia (VaD), a greater decline in thinking abilities. Some experts believe that 10-20% of Americans over age 65 with dementia have VaD. This makes it second only to Alzheimer's disease as a leading cause of dementia.
- Therapies or medicines almost never fully restore memory after stroke. But, many people do recover at least some memory spontaneously after stroke. Others improve through rehabilitation.

What may help:

- ✓ Try to form a routine – doing certain tasks at regular times during the day.
- ✓ Try not to tackle too many things at once. Break tasks down into steps.
- ✓ If something needs to be done, make a note of it or do it right away.
- ✓ Make a habit of always putting things away in the same place where they can be easily seen or found.

Aphasia

After a stroke, one of the most common thinking problems is trouble with communication. Aphasia is one of these problems. About one million people in the United States have aphasia. Most cases are the result of stroke.

Aphasia is a partial or total loss of ability to talk, understand what people say, read or write. It may affect only one aspect of language. For example, you may be unable to remember the names of objects or put words together into sentences. More often, many aspects are affected at the same time.

There are several types of aphasia. They differ by where the brain is damaged.

- Global aphasia is the most severe form. People with global aphasia can speak few familiar words and barely understand what people say. They cannot read or write.
- Another form is Broca's, or nonfluent, aphasia. People with this often omit certain kinds of words from sentences, speak slowly and with effort, and have a hard time with grammar. They mainly speak short statements of less than four words, like "walk dog."
- People with Wernicke's or fluent aphasia talk easily. But they use the wrong sounds in words, say the wrong words, or even make up words.

You may recover from aphasia without treatment. Most, however, benefit from therapy by a speech and language therapist. The goal is to improve your ability to communicate with other people.

This is done by helping you get back some of your language skills and learning new ways of getting your message across when needed.

Communication tips:

- Use props to make conversation easier (photos, maps).
- Draw or write things down on paper.
- Take your time. Make phone calls or try talking to people only when you have plenty of time.
- Show people what works best for you.
- Stay calm. Take one idea at a time.
- Create a communication book that includes words, pictures and symbols that are helpful to you.
- The Internet can be used to talk to people via email or to create a personal web page for yourself.

What Can Help

- Get information on stroke recovery from National Stroke Association. Visit www.stroke.org or call 1-800-STROKES (1-800-787-6537).
- Contact your local stroke association.
- Join a stroke support group. Other survivors will understand, validate your issues, and offer encouragement and ideas for dealing with memory loss.

Professionals Who Can Help

- ✓ Neuropsychologist – a doctor who can diagnose and treat changes in thinking, memory, and behavior after stroke. Ask your neurologist for a referral.
- ✓ Speech and language therapist – to find one in your area call the American Speech-Language-Hearing Association at (800) 638-8255.

Rehabilitation is a lifetime commitment and an important part of recovering from a stroke. Through rehabilitation, you relearn basic skills such as talking, eating, dressing and walking. Rehabilitation can also improve your strength, flexibility and endurance. The goal is to regain as much independence as possible.

Remember to ask your doctor, “Where am I on my stroke recovery journey?”

Note: This fact sheet is compiled from general, publicly available medical information and should not be considered recommended treatment for any particular individual. Stroke survivors should consult their doctors about any personal medical concerns.



The information provided in this Volunteer Training Manual is intended to help you be successful in your job as a Circle Center Adult Day Services Volunteer and understand the expectations of Circle Center’s participants and staff.

Please sign below acknowledging receipt of this CCADS Volunteer Training Manual and participation in the Volunteer Training Program.

- I read and understand Circle Center Adult Day Services’ Volunteer Training Manual.
- I have attended the Circle Center Adult Day Services’ Volunteer Training.

Signature

Date

Print Name: _____